

8734

F 40 R EFFO00089 IDAHO INDIVIDUAL INCOME TAX RETURN

| | | _ | _ | | | |
|-------------------------|-----------------------------|--|--|--|--------------------|------------------|
| АМЕ | ENDED RE | TURN, check the box. | State Use Only | | | |
| | | , page 6 for the reasons d enter the number. | | | | |
| | | year 2013, or fiscal year beginning | , ending | -[| | |
| | | | ast name | Your Social Security Number (r | required) | |
| PLEASE PRINT OR TYPE | | | | | | Deceased in 2013 |
| | Spouse's fi | rst name and initial L | ast name | Spouse's Social Security Number | ber (required) | 111 2013 |
| | | | | | | Deceased |
| яŠ Г | Mailing address | | | 1 | | in 2013 |
| Ē | City State | and 7in Code | Do you need Idaho income tax forms mailed to you next year? | | | |
| <u>.</u> | City, State, and Zip Code | | | • <u> </u> | res ∎ No |) |
| FILI | ING STATU | JS. Check only one box. | 6. EXEMPTIONS. If company can claim | | - Vours | aclf a |
| If fil | ling marrie | ed joint or separate return, enter | dependent, leave box | • | | self a |
| spo | use's nam | ne and Social Security Number above. | · | | ороц | |
| | 1. Si | ngle | c. List your dependents. If more than Enter the total number here | | | c. |
| | 2. M | arried filing joint return | _ First name | Last name | Social Security No | umber |
| | | | | | | |
| | 3. M | arried filing separate return | | | | |
| | 4. He | ead of household | | | | |
| | 5. Qı | ualifying widow(er) | | | | |
| | | | d. Total exemptions. Add lines 6a thro | ugh 6c. Must match fed | eral return | d. |
| INC | OME. See | e instructions, page 7. | I | | | |
| 7. | Enter you | federal adjusted gross income from federal | eral Form 1040, line 37; federal Form 1040 | OA, line 21; | | |
| | | | e copy of your federal return | | 7 | 00 |
| | | | orm 39R | | 9 | 00 |
| | | | de Form 39R | | 10 | 00 |
| | | , | | | | |
| 11. | TOTAL A | DJUSTED INCOME. Subtract line 10 fro | m line 9 | ······································ | 11 | 00 |
| TAX | к сомрит | TATION. See instructions, page 7. | | 1 | | |
| | | a. If age 65 or older 12. CHECK — b. If blind | | Spouse | | |
| - 1 | Standard eduction | | | Spouse | | |
| F | For Most | | ter zero on lines 18 and 42. | , | | |
| | People | 13 Itemized deductions Include fede | ral Schedule A | | 13 | 00 |
| Ma | Single or arried filing | All state and local income or gener | | | 13 | - 00 |
| S | eparately: \$6,100 | <u> </u> | | | 14 | 00 |
| | Head of | 15. Subtract line 14 from line 13. If you | u do not use federal Schedule A, enter ze | ro | 15 | 00 |
| H | ousehold: | old: | | | | |
| | \$8,950 | | ction For Most People | | 16 | 00 |
| Jo Qı Wi | arried filing Jointly or | 17. Subtract the LARGER of line 15 or | 16 from line 11. If less than zero, enter z | ero | 17 | 00 |
| | Qualifying Vidow(er): | 18. Multiply \$3,900 by the number of e | xemptions claimed on line 6d | | 18 | 00 |
| | \$12,200 | | e 18 from line 17. If less than zero, enter | | | 00 |
| | | | See instructions, page 36 | İ | | 00 |
| | | | | | | |

Continue to page 2.

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056 INCLUDE A COMPLETE COPY OF YOUR FEDERAL RETURN.





State Income Tax Return Forms

You can prepare and efile this tax form on efile.com as part of your current Federal and/or State Tax Return on from:

Early January until mid October

You can start, prepare, and efile your tax return now

You will just need to answer a few tax questions and the efile.com tax preparation software will select the correct tax forms for you.



Attention

If you missed the mid October efile deadline for the current tax year you have the following options to prepare and file your tax return:

1. You can download the State Tax form here:

http://www.efile.com/support-state-tax-agency-list/

2. Work online on your tax return with an efile Tax Professional

Start working with a LIVE TaxPRO

Download Federal tax forms by tax year, complete and mail to the IRS Download Federal Tax Forms

Free Tax Tools, Calculators and Educators

Head of Household Educator:

http://www.efile.com/claim-head-of-household-single-qualifying-person-requirement-tax-tool/

Qualifying Child Dependent Educator:

http://www.efile.com/qualifying-child-test-qualified-dependent-tax-tool/

Qualifying Relative Educator:

http://www.efile.com/qualifying-relative-test-dependent-requirement-tax-tool/

Earned Income Tax Credit Educator:

http://www.efile.com/what-is-the-earned-income-tax-credit-eitc-eic-eligibility-schedule-calculator/

Child Tax Credit Educator:

http://www.efile.com/how-to-qualify-for-child-tax-credit-deduction-requirements-tool/

Got Tax Questions? Contact efile.com!

Page 2

Form 40 - 2013 EFO00089p2 09-10-13

| CREDITS. Limits apply, See instructions, page 8. | 21 | Tax amount from line 20 | 21 | | 00 |
|--|-------------|---|--------------------|--|---------|
| 22 100 23 101 102 24 20 24 20 25 24 26 27 27 28 28 29 29 29 29 29 29 | | | 21 | | 00 |
| 23. Total business income tax credits from Form 44, Part I, line 12. Include Form 44 | | 11.9 | | | |
| 24. Total business income tax credits from Form 44, Part I, line 12. Include Form 44. | | | | | |
| 25. TOTAL CREDITS. Add lines 22 through 24 26. Subtract line 25 from line 21. If line 25 is more than line 21, enter zero 27. Fuels tax due. Include Form 75 28. 27. Fuels tax due. Include Form 75 29. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44 29. 0.0 29. Total tax from recapture of qualified investment exemption (OIE). Include Form 44 29. 0.0 30. Tax from recapture of qualified investment exemption (OIE). Include Form 49ER 30. 0.1 31. Permanent building fund. Check the box if you are receiving Idaho public assistance payments 31. 10. 0. 32. TOTAL TAX. Add lines 26 through 31 31. ODNATIONS. See instructions, page 8. I want to donate to: 33. Nongame Wildlife Conservation Fund 34. Idaho Children's Trust Fund 35. Special Olympics Idaho 36. Idaho Guard and Reserve Family 37. American Red Cross of Gratel Idaho Fund 38. Veterans Support Fund 41. TOTAL TAX PLUS DONATIONS. Add lines 32 through 40 41. TOTAL TAX PLUS DONATIONS. Add lines 32 through 40 42. Opportunity Scholarship Program 43. Idaho Foodbank 44. Opportunity Scholarship Program 44. To receive your grocery credit. Tomputed Amount (from worksheet) 75. receive your grocery credit. Tomputed Amount (from worksheet) 76. To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 42 42. 0. 0. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | | · · · | | | |
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| OTHER TAXES. See instructions, page 8. 27. Fuels tax due. Include Form 75. 28. Sales/Use tax due on nontaxed purchases (Internet, mail order, and other) 28. Sales/Use tax due on nontaxed purchases (Internet, mail order, and other) 29. Total tax from recapture of qualified investment exemption (OEI). Include Form 44 29. 0. 30. Tax from recapture of qualified investment exemption (OEI). Include Form 49ER 30. 0. 31. Permanent building fund. Check the box if you are receiving Idaho public assistance payments 31. 10. 0. 31. Permanent building fund. Check the box if you are receiving Idaho public assistance payments 31. 10. 0. 32. TOTAL TAX. Add lines 26 through 31. 33. Nongame Wildlife Conservation Fund 34. Idaho Children's Trust Fund 33. Nongame Wildlife Conservation Fund 34. Idaho Children's Trust Fund 35. Special Olympics Idaho 36. Idaho Guard and Reserve Family 37. American Red Cross of Greater Idaho Fund 40. Opportunity Scholarship Program 41. TOTAL TAX PLUS DONATIONS. Add lines 22 through 40. 42. Grocery credit. Computed Amount (from worksheet) 43. Maintaining a home for family member age 65 or older, or developmentally disabled. Include Form 39R 44. Special fluels tax refund 45. Idaho income tax withheld. Include Form(s) W-2 and any 1099(s) that show Idaho withholding 46. 2013 Form 51 payment(s) and amount applied from 2012 return 47. Pass-through income tax. Wilthheld Paril of Paril by entity 48. Hire One Act credit for new employees. Include Form 72 49. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 42 through 48 40. 0. 41. TAX DUE or REFUND. See instructions, page 10. If line 41 is more than line 49, GO TO LINE 50. If line 41 is less than line 49, GO TO LINE 5. 48. 0. 0. 49. TOTAL PAYMENTS AND OTHER CREDITS and lines 42 through 48 40. 0. Tax DUE. Subtract line 49 from line 41 41. Check box if penalty is due to an ineligible withdrawal from an Idaho medical savings account 48. 0. 0. 49. TOTAL DUE. Add lines 50 and 51. Make check or money order payable to the Idaho State Tax | 25. | TOTAL CREDITS. Add lines 22 through 24 | 25 | | 00 |
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| To receive your grocery credit, enter the computed amount on line 42 | 42. | | | | |
| 43 | | To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 42. | | | |
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| 45. Idaho income tax withheld. Include Form(s) W-2 and any 1099(s) that show Idaho withholding | | | 43 | | 00 |
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| or. Total due (into 62) or overpaid (into 60) or this rotal in | | · · · · · · · · · · · · · · · · · · · | 57 | | 00 |
| 58. Refund from original return plus additional refunds | | | | | 00 |
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| Within 180 days of receiving this return, the Idaho State Tax Commission may discuss this return with the paid preparer identified below. Under penalties of perjury, I declare that to the best of my knowledge and belief this return is true, correct and complete. See instructions. | •_ | | | | |
| SIGN Your signature Sperial Sp | | | | | |
| HERE * | | | | | |
| Date Daytime phone Preparer's EIN, SSN, or PTIN | | | | | |
| | | | | | |
| Paid preparer's signature Address and phone number | Paid p | preparer's signature Address and phone number | | | |
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